

PATENT

A circular ink stamp from the Office of Intellectual Property (OIP). The text "OIP" is at the top, "SEP 22 2006" is in the center, and "PATENT & TRADEMARK OFFICE" is at the bottom.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Free Patent Application of:

Applicants: GOELET, Philip, *et al.*

Application No.: 09/258,132

Filed: 26 February 1999

For: **“Nucleic Acid Typing by
Polymerase Extension of
Oligonucleotides Using
Terminator Mixtures”**

**Office of the Deputy Commissioner
for Patent Examination Policy**

Adjustment date: 10/26/2006 CKHLOK
09725/2006 NGEBREM1 00000014 09258132
61 FC:1462 -400.00 DP

Repln. Ref: 10/26/2006 CKHLOK 0011064800
 DAY: 110171 Name/Number: 09258132
 FCL: 9204 \$520.00 CR

Kalow & Springut LLP
488 Madison Avenue, 19th Floor
New York, New York 10022

20 September 2006

**Mail Stop Petition
Commissioner for Patents
Post Office Box 1450
Alexandria, VA 22313-1450**

09/25/2006 MGE BRE#1 00000014 09258132

01 FC:1462

400.00 0P

**PETITION UNDER 37 CFR 1.183
TO SUSPEND THE RULES**

SIR or MADAM:

In connection with the patent application identified above, the attorneys for the applicants hereby petition the United States Patent and Trademark Office under 37 CFR 1.183 to suspend rule 37 CFR 1.136(a)(1)(i) and enter a petition for a one-month extension of time under 37 CFR 1.136(a), attached as Appendix B, and a statement making of record the substance of a

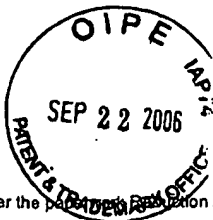
Certificate of Mailing Under 37 CFR 1.8

I hereby declare that this Petition to Suspend the Rules with Appendices A- C attached are being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Petition, Commissioner for Patents, Post Office Box 1450, Arlington Virginia 22313-1450 on 10/2/11

20 September 2006.

Date _____

J. David Ellett, Jr. (Reg. No. 27,875)

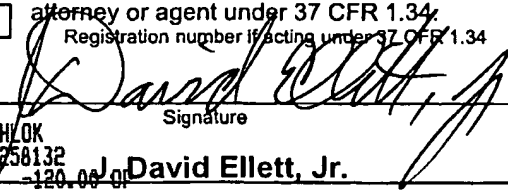


[modified]

PTO/SB/22 (12-04)

Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <small>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</small>		Docket Number (Optional) 13017-3																									
Application Number 09/258,132		Filed 26 February 1999																									
For Nucleic Acid Typing by Polymerase Extension of Oligonucleotides Using Terminator Mixtures																											
Art Unit 1634		Examiner MYERS, Carla J.																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 15%; text-align: center;"><u>Fee</u></th> <th style="width: 15%; text-align: center;"><u>Small Entity Fee</u></th> <th style="width: 30%;"></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$120</td> <td style="text-align: center;">\$60</td> <td style="text-align: right;">\$ <u>120.00</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$450</td> <td style="text-align: center;">\$225</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1020</td> <td style="text-align: center;">\$510</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1590</td> <td style="text-align: center;">\$795</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2160</td> <td style="text-align: center;">\$1080</td> <td style="text-align: right;">\$ _____</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check to cover the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>11-0171</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>27,875</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</p> <p style="text-align: center;">  Signature </p> <p style="text-align: right;"> <u>20 September 2006</u> Date </p> <p style="text-align: center;"> <u>David Ellett, Jr.</u> Typed or printed name </p> <p style="text-align: right;"> <u>(212)813-1600</u> Telephone Number </p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>					<u>Fee</u>	<u>Small Entity Fee</u>		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120.00</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____
	<u>Fee</u>	<u>Small Entity Fee</u>																									
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<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____																								

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Adjustment date: 10/26/2006 CKH/LK
 09/25/2006 MGE/REN1 00000014 09258132
 02 FC:1251

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>10/26/06</u>				2 Serial/Patent # <u>09/258,132</u>							
3 Please refund the following fee(s):				4 PAPER NUMBER	5 DATE FILED	6 AMOUNT					
	Filing					\$					
	Amendment					\$					
X	Extension of Time (1251)				09/22/06	\$ 120.00					
	Notice of Appeal/Appeal					\$					
X	Petition (1462)					\$ 400.00					
	Issue					\$					
	Cert of Correction/Terminal Disc.					\$					
	Maintenance					\$					
	Assignment					\$					
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				7 TOTAL AMOUNT OF REFUND			\$ 520.00				
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10 REASON:				Treasury Check							
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	Duplicate Payment			9	1	1	--	0	1	7	1
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The fees are unnecessary											
11 REFUND REQUESTED BY: <u>Christina T. Donnell</u>											
TYPED/PRINTED NAME: <u>Christina T. Donnell</u>						TITLE: <u>Petitions Attorney</u>					
SIGNATURE: <u>C T Donnell</u>						PHONE: <u>272-3211</u>					
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Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: